VAN BUREN HALL-FDD

115	SOUTH	VAN	BUREN	STREET

GREEN BAY 54301 Phone: (920) 468-4801		Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	FDDs
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	50	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/03):	50	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	40	Average Daily Census:	41

	Age, Gender, and Primary Di	agnosis	of Residents (1	.2/31/03)	Length of Stay (12/31/03)	용
			. 5			7.5 17.5
	•		1			72.5
	•					
				0.0		97.5
No	Alcohol & Other Drug Abuse	0.0	85 - 94	2.5	***********	*****
No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent	
No	Cancer	0.0			Nursing Staff per 100 Res	idents
No	Fractures	0.0		100.0	(12/31/03)	
No	Cardiovascular	0.0	65 & Over	7.5		
No	Cerebrovascular	0.0			RNs	0.3
No	Diabetes	0.0	Gender	%	LPNs	10.3
No	Respiratory	0.0			Nursing Assistants,	
	Other Medical Conditions	0.0	Male	55.0	Aides, & Orderlies	41.8
Yes			Female	45.0		
	1	100.0				
Yes	I			100.0		
	No N	No   Primary Diagnosis No   No   Developmental Disabilities No   Mental Illness (Org./Psy) No   Mental Illness (Other) No   Alcohol & Other Drug Abuse No   Para-, Quadra-, Hemiplegic No   Cancer No   Fractures No   Cardiovascular No   Cerebrovascular No   Diabetes No   Respiratory	No   Primary Diagnosis	No   Primary Diagnosis	No   Primary Diagnosis	No   Primary Diagnosis

## Method of Reimbursement

		edicare itle 18			Medicaid Sitle 19		Other		Private Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	୍ଚ	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				40	100.0	117	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	40	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		40	100.0		0	0.0		0	0.0		0	0.0		0	0.0		40	100.0

County: Brown Facility ID: 9111 Page 2 VAN BUREN HALL-FDD

*******	******	*****	****	*****	*****	******	*****
Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	nd Activities as of 1	2/31/03
Deaths During Reporting Period	1						
					% Needing		Total
Percent Admissions from:	- 1	Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	30.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	65.0		25.0	10.0	40
Other Nursing Homes	0.0	Dressing	65.0		25.0	10.0	40
Acute Care Hospitals	0.0	Transferring	80.0		10.0	10.0	40
Psych. HospMR/DD Facilities	70.0	Toilet Use	80.0		10.0	10.0	40
Rehabilitation Hospitals	0.0	Eating	75.0		17.5	7.5	40
Other Locations	0.0	******	*****	*****	*****	******	******
Total Number of Admissions	10	Continence		용	Special Treatmen	nts	8
Percent Discharges To:		Indwelling Or Extern	al Catheter	2.5	Receiving Resp	piratory Care	2.5
Private Home/No Home Health	28.6	Occ/Freq. Incontinen	t of Bladder	7.5	Receiving Tra	cheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	7.5	Receiving Suc	tioning	0.0
Other Nursing Homes	0.0				Receiving Ost	omy Care	2.5
Acute Care Hospitals	0.0	Mobility			Receiving Tube	e Feeding	0.0
Psych. HospMR/DD Facilities	28.6	Physically Restraine	:d	0.0	Receiving Mecl	hanically Altered Die	ts 10.0
Rehabilitation Hospitals	0.0						
Other Locations	42.9	Skin Care			Other Resident (	Characteristics	
Deaths	0.0	With Pressure Sores		0.0	Have Advance l	Directives	100.0

5.0 Medications

Receiving Psychoactive Drugs

100.0

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

| With Rashes

7 I

Total Number of Discharges

(Including Deaths)

	This Facility		DD ilities		All ilties
	8	8	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	82.0	89.6	0.92	87 <b>.</b> 4	0.94
Current Residents from In-County	60.0	33.5	1.79	76.7	0.78
Admissions from In-County, Still Residing	20.0	11.3	1.77	19.6	1.02
Admissions/Average Daily Census	24.4	21.3	1.15	141.3	0.17
Discharges/Average Daily Census	17.1	25.0	0.68	142.5	0.12
Discharges To Private Residence/Average Daily Census	4.9	11.4	0.43	61.6	0.08
Residents Receiving Skilled Care	0.0	0.0	0.00	88.1	0.00
Residents Aged 65 and Older	7.5	15.3	0.49	87.8	0.09
Title 19 (Medicaid) Funded Residents	100.0	99.3	1.01	65.9	1.52
Private Pay Funded Residents	0.0	0.5	0.00	21.0	0.00
Developmentally Disabled Residents	100.0	99.4	1.01	6.5	15.40
Mentally Ill Residents	0.0	0.3	0.00	33.6	0.00
General Medical Service Residents	0.0	0.3	0.00	20.6	0.00
Impaired ADL (Mean) *	18.5	53.1	0.35	49.4	0.37
Psychological Problems	100.0	50.1	2.00	57.4	1.74
Nursing Care Required (Mean) *	2.5	11.0	0.23	7.3	0.34